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Effective on 12/08/2004.	Complete if Known					
offisuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	10/600,363				
FEE TRANSMITTAL	Filing Date	June 20, 2003				
For FY 2008	Application Number 10/600,363  Filing Date June 20, 2003  First Named Inventor Sumio Kawai  Examiner Name Justin P. Misleh	Sumio Kawai				
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	Justin P. Misleh				
applicant claims small entity status. See 37 CFR 1.27	Art Unit	2622				

TOTAL AMOUNT OF PAYMENT (\$) 1740				Attorney Docke	t No. IPO	D-P1794			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number: 22-0493  Deposit Account Name: Volpe and Koenig, P.C.  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below  Charge fee(s) indicated below									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION									
BASIC FILING, SEARCH, AND EXAMINATION FEES     FILING FEES SEARCH FEES EXAMINATION FEES     Small Entity Small Entity Small Entity Small Entity Small Entity Small Entity									
	Fee (\$)	Fee (\$)	<u>Fee (\$</u>		Fee (\$)	Fee (\$)	Fees Paid (\$)		
,	310	155	510	255	210	105			
	210	105	100	50	130	65			
	210	105	310	155	160	80			
Reissue	310	155	510	255	620	310			
	210	105	0	0	0	0			
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims  Small Entity Fee (\$) Fee (\$) 25 25 370 185									
	ctra Clai		Fee	Paid (\$)		Multiple De	ependent Claims		
20 or HP = HP = highest number of total cla			=			<u>Fee (\$)</u>	Fee Paid (\$)		
_	ctra Clai	•	<u>Fee</u>	Paid (\$)		-	·		
HP = highest number of independ	dent claim	_"	n 3.						
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR	1.52(e)	), the application s	size fe	e due is \$260 (\$	\$130 for sn	nall entity) for	each additional 50		
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  - 100 =   (round up to a whole number) x  Fee Paid (\$)									
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)									
Other (e.g., late filing surcharge): Issue Fee (\$1,440) and Publication Fee (\$300)									

SUBMITTED BY

Signature

Registration No. (Attorney/Agent)

Registration No. 20,477

Telephone 215-568-6400

Date July 7, 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/21 (04-07)

JUL 0 9 2008

Approved for use through 09/30/2007.

Docket Number IPO-P1794
Justin P. Misleh
2622
ned Inventor Sumio Kawai
June 20, 2003
d to respond to a collection of information unless it displays a valid OMB control number 10/600,363

	ENCLOSURES (Check all that apply)													
<b>✓</b>	Fee Trans	smittal Fo	orm		Drawing	g(s)			After Allowance Communication to TC					
	<b>√</b> Fe	e Attach	ed	Licensing-related Papers					Appeal Communication to Board of Appeals and Interferences					
	Extension Express A	ter Final fidavits/d of Time	lectaration(s)	Petition Petition to Convert to a Provisional Application Power of Attorney, Revocate Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on C			e Address	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter Other Enclosure(s) (please Identify below):  - Form PTOL-85 - Form PTO-2038						
	Certified C		Priority	Rem	arks			<u> </u>						
Document(s)  Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53														
			SIGNA	TURE	OF AP	PLICANT, ATT	ORNEY, O	R AG	ENT					
Firm Name Volpe and Koenig, P.C.														
Signati	ure		41,)		,									
Printed	d name	Louis W	einstein						-					
Date July 7, 2008				Reg. No.			20,477							
CERTIFICATE OF TRANSMISSION/MAILING														
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Signati	ure		46	2	20	· · · · · · · · · · · · · · · · · · ·								
Typed	Typed or printed name Louis Weinstein Date July 7, 2008								July 7, 2008					

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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_						Juli	17	,2008		(Date)	
APPLICATION NO.	FILING DATE			FIRST NAMED INVENTOR ATTORNEY DOCI					CONFIR	MATION NO.	
10/600,363	06/20/2003			Sumio Kawai				IPO-P1794	7094		
TITLE OF INVENTION	I: LENS-INTERCHANG	EABLE	DIGITAL CAM	IERA SYSTEM		Ø7/Ø <del>9</del> /20	ua NHG	UYEN2 00000129 1	0600363		
						01 FC:15 · U2 FC:15	:01 :04			00 OP 00 OP	
APPLN. TYPE	APPLN. TYPE SMALL ENTITY ISSUE FEE DUE		E FEE DUE	PUBLICATION FEE	DUE	PREV. PAID ISSUE	E FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	nonprovisional NO			\$300	-	\$0	\$1740		O	08/15/2008	
EXAMINER ART UNIT				CLASS-SUBCLAS	S						
MISLEH,	JUSTIN P		2622	348-335000		•					
1. Change of correspond CFR 1.363).	ence address or indicatio	n of "Fee	Address" (37		•	atent front page, lis		.Volpe a	nd Koe	enig, P.C.	
	oondence address (or Cha	nge of Co	rrespondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,							
"Fee Address" ind	lication (or "Fee Address 32 or more recent) attach	on form f a Customer	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.								
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE I	PRINTED ON T	THE PATENT (print	or typ	e)					
PLEASE NOTE: Un recordation as set fort	less an assignee is ident th in 37 CFR 3.11. Comp	ified below	w, no assignee this form is NO	data will appear on T a substitute for filin	the pa	ntent. If an assigne assignment.	ee is ide	entified below, the de	cument h	as been filed fo	
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OLYMPUS CO	RPORATION			TOKYO,	JAPA	AN					
Please check the appropr	iate assignee category or	categorie	s (will not be pr	inted on the patent):		Individual 🖾 Co	rporatio	n or other private gro	up entity	Government	
4a. The following fee(s)  ** Issue Fee  ** Publication Fee (N  Advance Order - 1	No small entity discount p	ermitted)		A check is enclosed Payment by cred	sed. it card	d. Form PTO-2038	is attac	hed. quired fee(s), any de (0493 (enclose a			
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Authorized Signature	41 7	Ro				Date	Tuly	7,200			
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